

# Benefits

## Exempt – Non Elected

ALL BENEFITS ARE PER PAY PERIOD UNLESS OTHERWISE NOTED

<b>Union Code</b>	Exempt
<b>Representation</b>	Non-Represented
<b>Ordinance</b>	March 21, 2015
<b>Health and Welfare</b>	
<b>Benefit Level</b>	Full Time (61 - 80 hours)
<b>Medical Premium Subsidy (MPS)</b>	Employee Only \$230.00
	Employee + 1 \$352.23
	Employee + 2 \$482.64
<b>Dental Premium Subsidy (DPS)</b>	Up to \$9.46
<b>Medical Opt-Out</b>	Before 7/9/05 \$161.54
	After 7/9/05 \$40.00
<b>Medical Waive</b>	Before 7/9/05 \$230.00
	After 7/9/05 \$40.00
<b>Vision</b>	Employer Paid for Employee & Dependent Coverage
<b>Life Insurance - Employer Paid</b>	\$50,000
<b>Voluntary Term Life</b>	\$10,000 - \$700,000
<b>Voluntary AD&amp;D</b>	\$10,000 - \$250,000
<b>Variable Group Universal Life County Contribution</b>	Group A – 100% of 1x Annual Salary
	Group B – 50% of 1x Annual Salary or 100% of ½x Annual Salary
	Group C – 25% of 1x Annual Salary
	Group D – 25% of 1x Annual Salary
<b>Leave Provisions (effective PP 01/11)</b>	
<b>Vacation</b>	80-160 hours/year (Maximum carryover of 480 hours, with exceptions. Unused balance in excess of cap will automatically cash out in pay period 1)
<b>Sick</b>	3.69 hours
<b>Bereavement</b>	2 days per occurrence (3 if traveling > 1,000 miles)
<b>Holiday</b>	13 + 1 floating/year (Maximum carryover of 112 hours, with exceptions. Unused balance in excess of cap will automatically cash out in pay period 1)
<b>Administrative</b>	80 hours/year One opportunity during employment to exercise cash-out option
<b>Perfect Attendance (Groups C and D)</b>	16 hours of Perfect Attendance Leave
<b>Retirement</b>	
<b>Tier 1</b> (Hired prior to 1/1/2013, reciprocity provision may apply)	2% at age 55
	SAFETY – 3% at age 50
	Supplemental Contribution
	Group A \$442.53
	Group B \$236.41
	Group C \$152.17
	Group D \$94.67
<b>Tier 2</b> (Hired on or after 1/1/2013, reciprocity provision may apply)	2.5% at age 67 SAFETY – 2.7% at age 57

<b>Retirement – Other</b>	
<b>457(b)</b> Eligible to enroll at any time	Groups A & B = County contribution 1 times Employee contribution, up to 1% Groups C & D = County contribution ½ times Employee contribution, up to ½%
<b>401(k)</b> Eligible to enroll at any time	Groups A, B, & C=County contribution 2 times Employee contribution, up to 8% Group D = County contribution 2 times Employee contribution, up to 6%
<b>Retirement Medical Trust Fund</b>	<u>Sick Leave Conversion</u> Employees become eligible to convert a portion of their sick leave to the Retirement Medical Trust upon attaining 5 or more years of participation with SBCERA and/or other public retirement system(s).  <u>County Contribution, based on years of participation in a Public Retirement System:</u> 5-9 years = 1.00% of biweekly base salary 10-15 years = 1.75% biweekly base salary 16+ years = 2.75% biweekly base salary
<b>Other</b>	
<b>Annual Tuition Reimbursement</b>	\$1,000 per Employee
<b>Automobile Allowance</b>	Groups A & B, Assistant Sheriffs, Sheriff's Deputy Chiefs Biweekly allowance of \$561.54 with no mileage reimbursement, provided Employee is not assigned a County vehicle
<b>Dependent Care Assistance Plan</b>	Eligible
<b>Healthy Lifestyle Program</b>	Health Club Membership Reimbursement, up to \$324/year and Annual Physical Exam
<b>Long Term Disability</b>	60% up to \$10,000/month
<b>Medical Expense Reimbursement Plan (FSA)</b>	Max. \$98.07 employee contribution per pay period Plus up to \$40 County Match
<b>Portable Communication Device Allowance</b>	Groups A & B – biweekly allowance of \$92.31
<b>Qualified Transportation Plan</b>	Pre-tax deductions of up to \$255/month for qualified transportation (commuter) expenses
<b>Short Term Disability</b>	55% up to \$1,610/week

**The County offers *Premium Subsidies biweekly* to help off-set the cost of your medical and dental premiums.**

**Example #1:** The Undersheriff elects Kaiser Permanente and Cigna Dental PPO plans with Employee + 2 or more coverage:

\$838.66 (combined cost of premiums)  
 - \$482.64 (medical premium subsidy)  
 - \$ 9.46 (dental premium subsidy)  
**\$346.56 (biweekly out-of-pocket cost)**

**Example #2:** The County Surveyor elects Blue Shield Signature HMO and Cigna Dental Care HMO plans with Employee + 2 or more coverage:

\$663.03 (combined cost of premiums)  
 - \$482.64 (medical premium subsidy)  
 - \$ 9.46 (dental premium subsidy)  
**\$170.93 (biweekly out-of-pocket cost)**

**Example #3:** The Chief Probation Officer elects Blue Shield Signature HMO and Cigna Dental PPO plans with Employee + 1:

\$499.88 (combined cost of premiums)  
 - \$352.23 (medical premium subsidy)  
 - \$ 9.46 (dental premium subsidy)  
**\$138.19 (biweekly out-of-pocket cost)**